

ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Adams Memorial HospitalCity: Decatur County: Adams Year: **2004**

Provider Type: General Acute Hospital

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Med/Surg	4	238	397	\$2,514
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	39	1,302	5,500	\$3,363
Neonatal Intermed	0	0	0	\$0
Obstetrics	8	217	471	\$1,740
Pediatric	0	0	0	\$0

Psychiatric	0	0	0	\$0
Rehabilitation	14	440	2,500	\$4,093
Substance Abuse	0	0	0	\$0
Swing Beds	NA	0	0	\$0
Other Services	0	316	370	NA
Acute Subtotal	65	2,513	9,238	NA
Normal Newborn	9	206	430	\$940

II. Outpatient Visits			
Circulatory System	5,421	Digestive System	1,474
Endocrine System	7,095	Injuries and Poison	4,448
Mental Disorder	849	Musculoskeletal	6,014
Neoplasms	1,973	Nervous	1,612
Respiratory	2,493	Urinary	3,052
Other/Unknown	46,176	Total Visits	80,607
Number of Visits to Emergency Department			11,266
Percent of Emergency Department Visits of Total Visits			14.0%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	Y - Alcohol/Drug Service	Y - Anesthesia Services
N - Audiology	N - Blood Bank	N - Cardiac Cath Lab
N - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractic Service
Y - CT Scanner	N - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	Y - Home Health Service
N - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
Y - Magnetic Resonance (MRI)	Y - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
N - Ophthalmic Surgery	Y - Optometric Service	N - Organ Bank
N - Organ Transplant	N - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	N - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	N - Rehab Inpat CARF
Y- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	N- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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